

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS		9/8
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		68904	9/17/93

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/17/90
2	✓	✓	
3	✓	✓	
4	✓	✓	
12	✓	✓	
13	✓	✓	
1	0	0	
5	0	0	
6	0	0	
7	0	0	
8	0	0	
9	0	0	
10	0	0	
15	0	0	
11	✓	✓	
14	✓	✓	
16	0	0	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	✓	✓	
27	✓	✓	
17	0	0	
23	✓	✓	
24	✓	✓	
30	✓	✓	
31	✓	✓	
32	✓	✓	
33	✓	✓	
34	✓	✓	
35	✓	✓	
36	✓	✓	
37	✓	✓	
38	✓	✓	
39	✓	✓	
40	✓	✓	
41	✓	✓	
42	✓	✓	
43	0	0	
44	0	0	
45	0	0	
46	0	0	
47	0	0	
48	0	0	
49	0	0	
50	0	0	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE) **BEST AVAILABLE COPY**